

SIGN PERMIT APPLICATION

LOCATION / ADDRESS:					
SIGN CONTRACTOR / OWNE	R:				
BUSINESS NAME WHERE SIGN WILL BE LOCATED:					
ELECTRICAL CONTRACTOR: (IF APPLICABLE)					
DESCRIPTION OF WORK:					
TYPE OF SIGN: WALL SIGN	NUMBER OF SIGNS	AREA (SQ. FT.)	ILLUMINATED? (Y/N)	HEIGHT	SETBACK
POLE SIGN					
MONUMENT SIGN AWNING SIGN					
BALLOON SIGN					
CHANGEABLE COPY SIGN OTHER					
Written certification from the when measured from the sign from the sign face at its max	ncs face at its maximum	brightness, during	daylight hours and	1,000 nits v	
NOTICE: Plans for wall signs parapet wall or roof eave and					
Please submit two (2) sign r Setbacks	enderings and two (2) sit are measured from the				mit application.
JOB COST:					
I HEREBY AGREE NOT TO WRITTEN APPROV	O ALTER, OR DEVIATE AL FROM THE BUILDIN				
SIGNATURE			PHONE NUMBER		
DATE	_		EMAIL		

